

Corres, and Mail

Response Under 37 CFR § 1.116 Expedited Procedure - Group 2852

In re Application of:

KEIJU KUBOKI

Application No.: 09/866,789

Filed: May 30, 2001

For: IMAGE FORMING APPARATUS, IMAGE FORMING METHOD AND

STORAGE MEDIUM THEREFOR

Commissioner for Patents Washington, D.C. 20231

Box AF

Sir:

03500.015385

Docket No.

Examiner: R. Beatty

Group Art Unit: 2852

Date: April 11, 2003

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents. Washington, D.C. 20231 on 17053

(Date of Deposit) Dennis A. Duchene, Reg. No. 40,595

Name of Attorney for Applicant

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

		CI	AIMS AS AMEN	DED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 66	MINUS	**	= 0	x \$9 \$18	\$ 0
INDEP. CLAIMS	* 20	MINUS	***	= 0	x \$42 \$84	\$ 0
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					-0-	

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

°Verified Statement claiming small entity status is enclosed, if not filed previously.

	A check in the amount of \$ is enclosed.				
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.				
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.				
X	A check in the amount of \$110.00 to cover the fee for a one-month extension is enclosed.				
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.				
X	Applicant's undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. A correspondence should continue to be directed to our address given below.				
	Respectfully submitted,				
·	Attorney for Applicant Registration No. 40,595				
	registration ivo. 40,515				

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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